FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention

SYSTEMS FOR DEEP RESISTIVITY WHILE DRILLING FOR PROACTIVE GEOSTEERING

Application Number:

Date:

First Named Applicant:

JEAN SEYDOUX

Attorney Docket Number:

24.0897

TOTAL FEE AUTHORIZED \$ 1216

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$					
Utility Filing Fee	1001	770	770					
Subtotal For Basic Filing Fees: \$ 770								

EXTRA CLAIM FEES

Fee Description	Extra Claims	Fee Code	Amount \$	Fee Paid \$
Total Claims : 33	13	1202	18	234
Independent Claims: 5	2	1201	86	172
			Subtotal For Extra	Claims Fees: \$ 406

ASSIGNMENT FEES

Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$			
Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40			
Subtotal For Additional Fees: \$40								

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number:

190610

Access Code

Deposit name:

SCHLUMBERGER OILFIELD SERVICES

Deposit authorized name:

BRIGITTE L. JEFFERY

Signature:

BRIGITTE L. JEFFERY

03/30/2004 BHABTEW 00000002 190610 1070798

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/7071885

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OR	OTHER SMALL	
TOTAL CLAIMS			33			•		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	77,0.00
TC	TAL CHARGEA	BLE CLAIMS	93 min	us 20=	*	13		X\$ 9=		OR	X\$18=	234
INC	EPENDENT CL	AIMS	J mir	nus 3 =	*	2		X43=		OR	X86=	172
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	ı	TOTAL	·	OR	TOTAL	1176
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column					(Column 3)		SMALL E	NTITY	OR	OTHER SMALL		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVICE PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		1	+145=		OR	+290=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)				-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENI	CLAIM		ן נ	+145=		OR	+290=	,
							į	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		 (Column 1)		(Colur	nn 2)	(Column 3)		40011. T CC •				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATF.	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
WE	Independent	*	Minus	***		=	↓ [X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		┪	+145=		OR	+290=	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						\ - L	TOTAL		OR	TOTAL ADDIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												